

## Confirmation Services™ Electronic Option Application

<b>Customer Information</b>			(Please print)
1. Company Name		2. Today's Date	3. Estimated Date of First Mailing
4.Dun & Bradstreet (D-U-N-S) Number		5. Point(s) of Contact (May be same pe	erson on PS Form 1357-S)
6. Street Address (No., street, ste. no., city, state, ZIP + 4)		7. Email Address of Company Point(s) of Contact	
		8. Phone Number and Extension	9. Fax Number
<ol> <li>How will you send your electronic file? (NOTE: You can get from your software vendor)</li> </ol>			12. Will you print your own barcoded labels?
	No Transmission From This Site		
NOTE: You can obtain this information from your software	vendor.		
Optional Customer Information			

13. Please provide additional information unique to your process or other issues.

Completed by USPS Representative		
14a. Name and Title	14b. Phone Number and Extension	14c. Area and District

## **Application Processing**

Fax and mail PS Form 5051 and PS Form 1357-S to:

PRODUCT INFORMATION REQUIREMENTS PRODUCT DEVELOPMENT UNITED STATES POSTAL SERVICE 1735 N LYNN ST RM 2036 ARLINGTON VA 22209-6029

Fax Number: 703-292-3938

NOTE: If you have questions about completion of this form call Technical Support at 877-264-9693, Option 1.